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Modified 9-98

PTO/SB/21 (12-97)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

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Application / Conf. No.	10/084,569 / 7959
Filing Date	February 27, 2002
First Named Inventor	Ahmad R. Ansari
Examiner Name	Unassigned
Group Art Unit	2185
Issue Fee Batch No.	MAY 02 2002
Attorney Docket Number	Technology Center 2100

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (with Recordation Cover Sheet)	<input type="checkbox"/> After Allowance Communication to
<input type="checkbox"/> Amendment / Response <ul style="list-style-type: none"> <input type="checkbox"/> Preliminary Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit(s)/declaration(s) 	<input type="checkbox"/> Declaration / Oath	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Change Status to LARGE ENTITY	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Petition -	<input checked="" type="checkbox"/> Return Receipt Postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> To Convert a Provisional Application	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Substitute PTO-1449(s) IDS by Applicant (PTO/SB/08A)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	Copies of twelve (12) references cited
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application <ul style="list-style-type: none"> <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 	<input type="checkbox"/> Request for Refund	

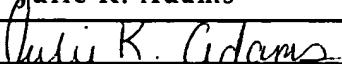
Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Customer Number	24309	Reg. Number 35,477
Attn:	H. C. Chan	(Customer Number)
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Date	April 18, 2002	Charge any additional fees required/credit any overpayment to our Deposit Account Number: 24-0040

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D. C. 20231 on this date: April 18, 2002

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